## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

16721950

| CLAIMS AS FILED - PART I                                                             |                                           |                                           |              |                                    |                    |                  |         | SMALL ENTITY |                        |         | OTHER THAN   |                                       |  |
|--------------------------------------------------------------------------------------|-------------------------------------------|-------------------------------------------|--------------|------------------------------------|--------------------|------------------|---------|--------------|------------------------|---------|--------------|---------------------------------------|--|
| Τ.                                                                                   | OTAL CLAIMS                               |                                           | (Column      | (Column 1)                         |                    | (Column 2)       |         | TYPE [       |                        | OR      | SMALL ENTITY |                                       |  |
| · · · · · · · · · · · · · · · · · · ·                                                |                                           |                                           | 135          | 33                                 |                    |                  |         | RATE         | FEE                    | ]       | RATE         | FEE                                   |  |
| FC                                                                                   | )R                                        |                                           | NUMBER       | NUMBER FILED                       |                    | NUMBER EXTRA     |         | BASIC FEE    | 385.00                 | OR      | BASIC FEE    | 770.00                                |  |
| TC                                                                                   | OTAL CHARGE                               | ABLE CLAIMS                               | 33 minus 20= |                                    | * 13               |                  |         | X\$ 9=       |                        | OR      | X\$18=       | 234                                   |  |
| INDEPENDENT CLAIMS 3 minus 3                                                         |                                           |                                           |              |                                    | *                  |                  |         | X43=         |                        | OR      | X86=         | , , , , , , , , , , , , , , , , , , , |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                                                     |                                           |                                           |              |                                    |                    |                  |         | +145=        |                        | OR      | +290=        |                                       |  |
| * If the difference in column 1 is less than zero, enter "0"                         |                                           |                                           |              |                                    |                    | column 2         | ı       | TOTAL        |                        | OR      | TOTAL        | 1204                                  |  |
| CLAIMS AS AMENDED - PART II                                                          |                                           |                                           |              |                                    |                    |                  |         |              |                        | ]       | OTHER        | THAN                                  |  |
|                                                                                      |                                           | (Column 1)                                |              | (Colum                             | nn 2)              | (Column 3)       |         | SMALL        | ENTITY                 | OR      | SMALL        |                                       |  |
| AMENDMENT A                                                                          |                                           | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUME<br>PREVIO<br>PAID F  | BER<br>OUSLY       | PRESENT<br>EXTRA |         | RATE         | ADDI-<br>TIONAL<br>FEE |         | RATE         | ADDI-<br>TIONAL<br>FEE                |  |
|                                                                                      | Total                                     | *                                         | Minus        | **                                 |                    | =                |         | X\$ 9=       |                        | OR      | X\$18=       |                                       |  |
|                                                                                      | Independent                               | *                                         | Minus ***    |                                    |                    | =                | $  \  $ | X43=         |                        | OR      | X86=         |                                       |  |
|                                                                                      | FIRST PHESE                               | NTATION OF MU                             | JLTIPLE DEF  | ENDENI                             | CLAIM              |                  | 1       | +145=        |                        | OR      | +290=        |                                       |  |
|                                                                                      |                                           |                                           |              |                                    |                    |                  |         | TOTAL        |                        | 5       | TOTAL        |                                       |  |
|                                                                                      |                                           | A                                         | ADDIT. FEE   |                                    | OR,                | ADDIT. FEE       |         |              |                        |         |              |                                       |  |
|                                                                                      |                                           | (Column 1)<br>CLAIMS                      |              | (Colum<br>HIGHE                    |                    | (Column 3)       | 1 r     |              | 4501                   | 1       |              | 4551                                  |  |
| AMENDMENT B                                                                          |                                           | REMAINING<br>AFTER<br>AMENDMENT           |              | NUMB<br>PREVIO<br>PAID F           | USLY               | PRESENT<br>EXTRA |         | RATE         | ADDI-<br>TIONAL<br>FEE |         | RATE         | ADDI-<br>TIONAL<br>FEE                |  |
|                                                                                      | Total                                     | *                                         | Minus        | **                                 |                    | =                |         | X\$ 9=       |                        | OR      | X\$18=       |                                       |  |
|                                                                                      | Independent                               | *                                         | Minus        | ***                                |                    |                  | ]       | X43=         |                        | OR      | X86=         |                                       |  |
|                                                                                      | FIRST PRESENTATION OF MULTIPLE DEPENDE    |                                           |              |                                    | CLAIM              |                  | J       | +145=        |                        |         | +290=        |                                       |  |
|                                                                                      |                                           |                                           |              |                                    |                    |                  | L       | TOTAL        |                        | OR      | TOTAL        |                                       |  |
|                                                                                      | `                                         | Α                                         | DDIT. FEE    |                                    | OR ,               | ADDIT. FEE       |         |              |                        |         |              |                                       |  |
|                                                                                      |                                           | (Column 1)                                | <del></del>  | (Colum                             |                    | (Column 3)       |         |              |                        |         |              |                                       |  |
| AMENDMENT C                                                                          |                                           | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·            | HIGHE<br>NUMB<br>PREVIOI<br>PAID F | JER<br>USLY        | PRESENT<br>EXTRA |         | RATE         | ADDI-<br>TIONAL<br>FEE |         | RATE         | ADDI-<br>TIONAL<br>FEE                |  |
|                                                                                      | Total                                     | *                                         | Minus        | **                                 |                    | =                |         | X\$ 9=       |                        | OR      | X\$18=       |                                       |  |
|                                                                                      | independent                               | * .                                       | Minus        | ***                                |                    | = '              |         | X43=         |                        | _       | X86=         |                                       |  |
|                                                                                      | FIRST PRESENTATION OF MULTIPLE DEPENDENT  |                                           |              |                                    |                    |                  | ┞       |              |                        | OR      |              |                                       |  |
| * If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. |                                           |                                           |              |                                    |                    |                  |         | +145=        |                        | OR      | +290=        |                                       |  |
| ** }                                                                                 | f the "Highest Nur<br>If the "Highest Nur | TOTAL<br>DDIT. FEE                        |              | OR A                               | TOTAL<br>DDIT. FEE |                  |         |              |                        |         |              |                                       |  |
|                                                                                      |                                           | ber Previously Paid                       |              |                                    |                    |                  | r four  | d in the app | ropriate box           | in colu | ımn 1.       | J                                     |  |